

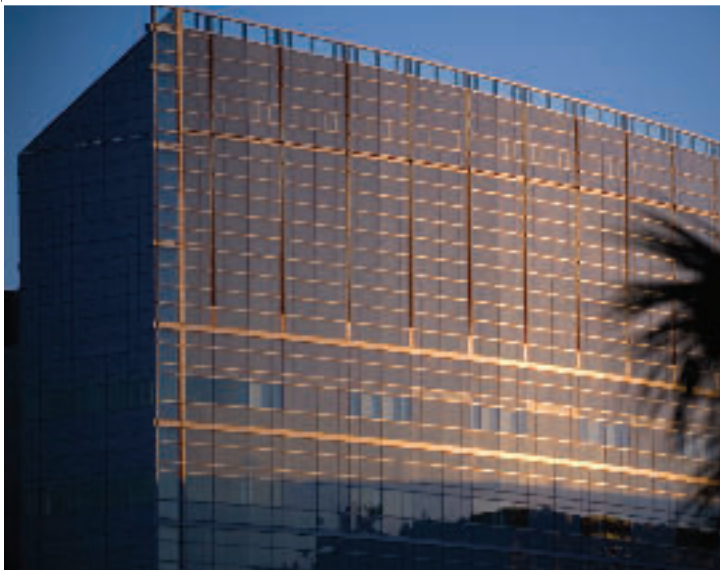
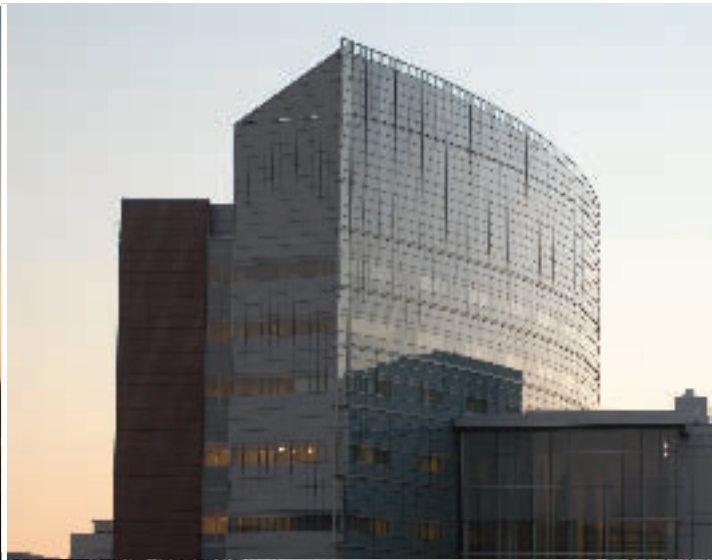


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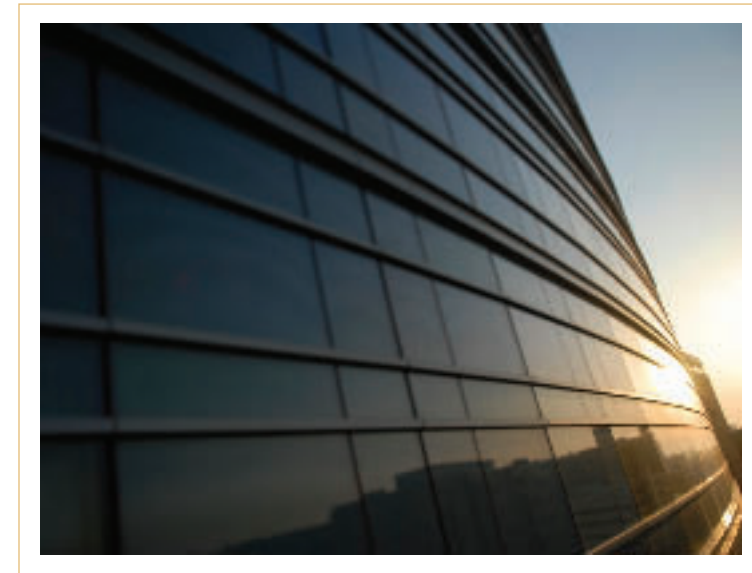
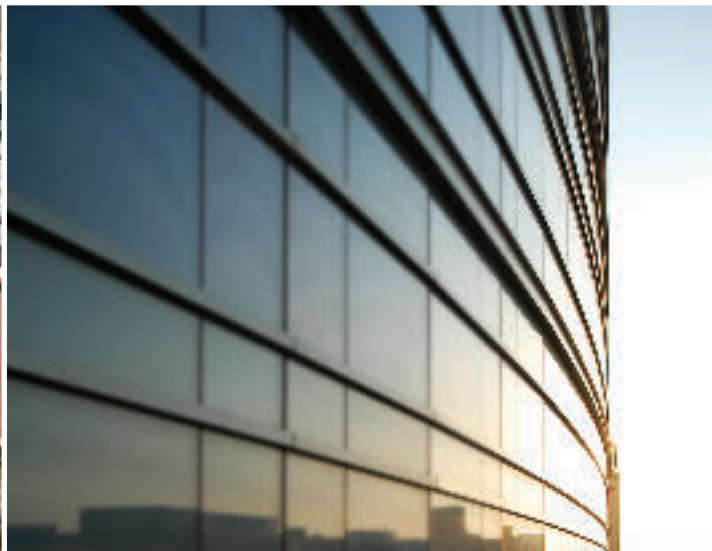
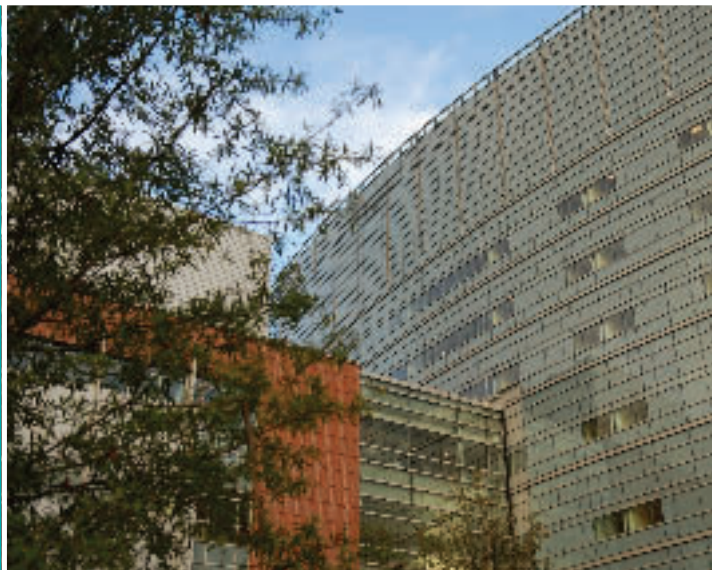
MUSC 2006-2007 ANNUAL REPORT

A New Era



"The combination of outstanding faculty, staff and students with a premier facility is what will make the Ashley River Tower one of the best hospitals in the country."

Raymond S. Greenberg, M.D., Ph.D.



EDITOR Jeff Watkins, MUSC Public Relations | GRAPHIC DESIGN CDesign Graphics

PHOTOGRAPHY Anne Thompson, MUSC Digital Imaging & Brennan Wesley, MUSC Business Development & Marketing Services

ASHLEY RIVER TOWER

By the Numbers

A 641,000 square-foot building to accommodate cardiovascular and digestive disease services.

This facility boasts 156 beds, including 32 ICU beds, nine operating rooms, catheterization laboratories, interventional radiology laboratories, endoscopy suites, imaging suites, a specialized chest pain center as well as out-patient offices.

3 leading-edge electrophysiology labs

9 state-of-the-art operating rooms

16 football fields of occupied space (hospital and energy plant)

22 beds designed specifically for bariatric patients

42 miles of pilings (hospital and energy plant)

156 beds for cardiovascular and digestive disease services

340 square footage in patient rooms

660 miles of electrical wire (hospital only)

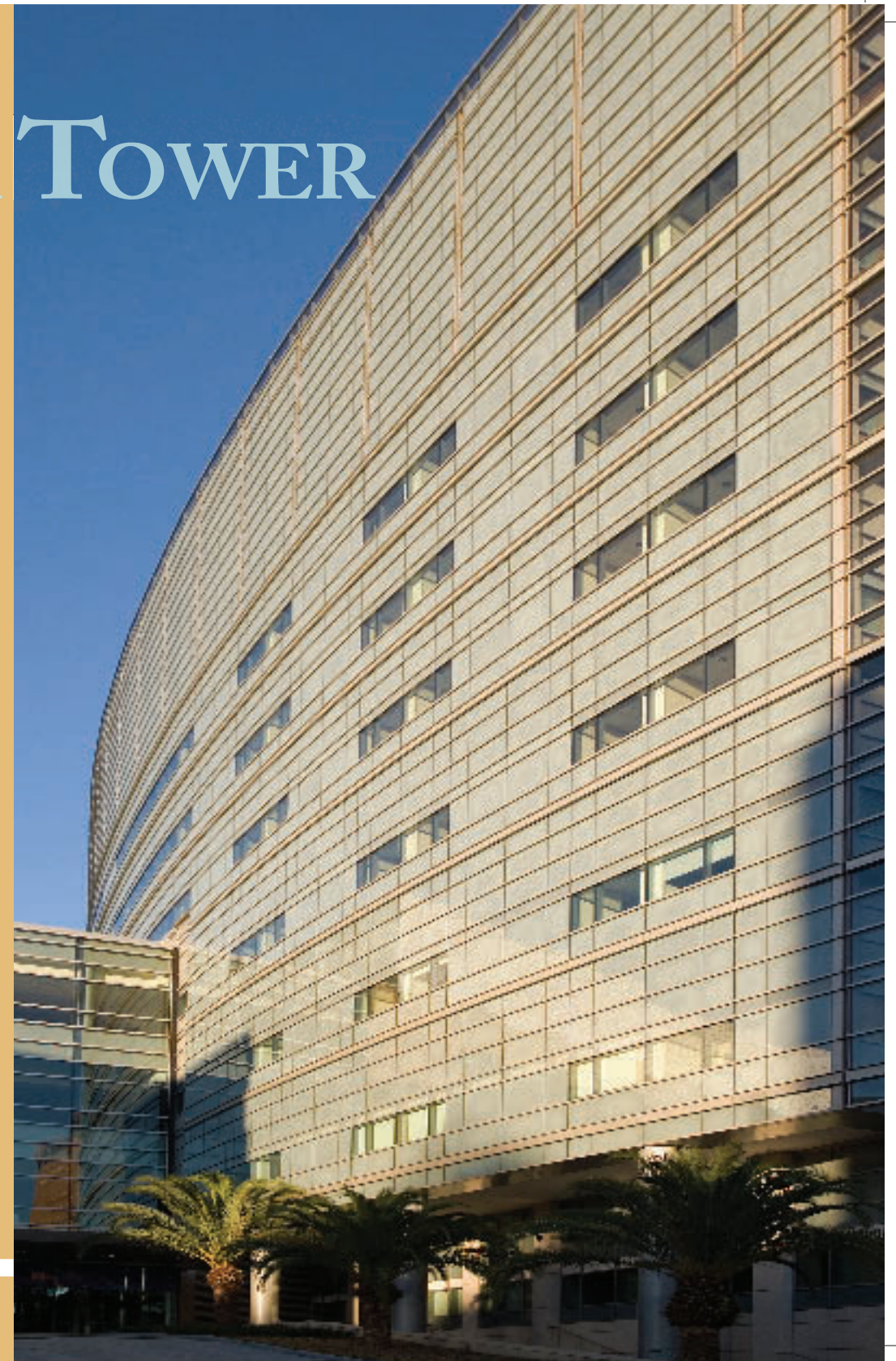
52,000 gross square footage of the central energy plant

641,000 gross square footage of the hospital

10.7 million pounds of structural steel (hospital only)

80.7 million pounds of concrete (hospital only)

**numbers are approximated*





From the President

The Medical University of South Carolina is embarking on a new era of medicine with the opening of the Ashley River Tower. At nearly 650,000 square feet, the Ashley River Tower is the largest single structure on the peninsula of Charleston. I recognize that size is not everything, but personally, I stand in awe of the fact that nearly 11 million pounds of steel and over 80 million pounds of concrete are resting comfortably and with great stability on top of pluff mud. Over 2,000 pilings are making sure that this is not a mobile hospital unit.

We have concentrated here on treating some of the most prevalent and serious medical conditions – heart, vascular and digestive diseases. These are the illnesses that are responsible for much of the excess mortality in our state. We believe that emerging technologies will dramatically improve clinical outcomes and that this hospital will be at the leading edge of the fight to eliminate health disparities in our population.

It is completely fitting that the Medical University should be pioneering the way to tomorrow's health care, because we are leaders in biomedical research, education, and clinical innovation. MUSC was the first center in the state to perform open-heart surgery, cardiac transplantation and pediatric cardiac surgery, and we have the only cardiology, cardiac electrophysiology and cardiothoracic surgery training programs in the state. Our cardiac transplantation program has the second best survival results of any program in the nation. In digestive disease care, we introduced a wide range of endoscopic and laparoscopic procedures for minimally invasive diagnosis and treatment.

Scientific work is progressing along the complete spectrum of research, from very fundamental science to investigations with direct clinical applications. Our ability to bring new discoveries from the laboratory bench to the patient's bedside means that

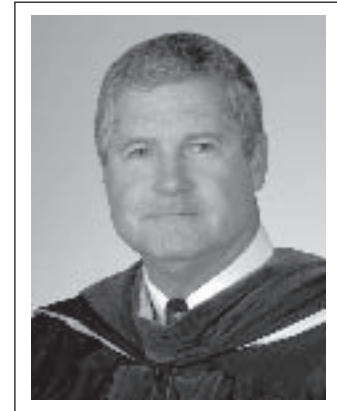
patients here will benefit from the latest advances in diagnosis and treatment. Many of these same scientists are also doctors who will be caring for patients in this facility.

The combination of outstanding faculty, staff and students with a premier facility is what will make the Ashley River Tower one of the best hospitals in the country. We salute the creativity and hard work of the more than 3,500 people who helped design and build this amazing structure and for their dedication, skill and compassion, we honor the thousands more who will work within it. Most importantly, we dedicate this hospital to the tens of thousands of patients who will be cared for here. From all over South Carolina and beyond, they will come to the Medical University with hope and great expectations. It is for those patients that we have labored so hard to make this dream a reality.

With best wishes,

Raymond S. Greenberg, M.D., Ph.D.
PRESIDENT

From the Chairman



This year Ashley River Tower joins an impressive array of clinical, educational and biomedical research facilities that together form the Medical University of South Carolina. It is as technologically advanced as it is pleasing to the eye, a marriage of science and the senses, utilizing natural light, maple wood and state-of-the-art equipment.

The Gazes-Thurmond Research building, Hollings Cancer Center, Darby Children's Research Institute and the new College of Health Professions complex are all relatively recent additions to an ever-changing campus. Even as Ashley River Tower opens its doors, other construction is under way, as evidenced by the Clinical Education Center of the College of Dental Medicine on Bee Street, and planning for additional construction is ongoing.

Ashley River Tower, with its seven-story glass facade evoking images of a sail catching the wind, is the latest and one of the most impressive structures, a merger of natural elements and sophisticated technology. In these pages you will learn more about the hospital and its features. Allow me to emphasize, however, the most important element you will find in Ashley River Tower – the human element.

The staffs of the Heart & Vascular and Digestive Disease services are among the best in the nation, and across the board of our clinical centers you will find excellent caregivers and staffs whose skill and dedication to their profession are unsurpassed. This is reflected in the Consumers Choice Award that the Medical Center has received for 10 consecutive years from the National Research Corporation.

In keeping with our mission to serve the citizens of South Carolina, MUSC's clinical component is complemented by equally robust constituents of academics and research.

We are the only South Carolina university listed among the top 100 recipients of federal research funding. Even with a flat budget at the National Institutes of Health, our support from this leading funder of peer-reviewed health care research grew by more than 10 percent last year. This is an amazing accomplishment and a great credit to the productivity of our faculty.

As the leading educator of health care providers for the state, it is also reassuring to know that the practitioners of tomorrow will be trained in such a cutting edge facility. Here, they will gain familiarity with digital information systems that ultimately will transform the recording, storage and transmittal of medical information in the decades ahead. The day that this hospital opens, it will be a virtually digital hospital – not yet completely paperless, but as close to it as current technology permits.

Ashley River Tower is a marvel of health care architecture and technology, but more importantly, it enables our clinicians to carry out their responsibilities, and will enable our patients to heal in a more comfortable environment. A hospital can only be as good as the people who work in it; therefore, what really makes Ashley River Tower a special place are the caregivers who are there for you day and night.

Sincerely,

A handwritten signature in red ink that reads "Charles B. Thomas, Jr. MD". The signature is fluid and cursive.

Charles B. Thomas, Jr., M.D.
CHAIRMAN



Above photos show progress of Ashley River Tower's construction from its beginning in early 2005 to near-completion.

After Ashley River Tower, what's next for MUSC?

The dedication of Ashley River Tower on Oct. 12, 2007 arrived with great fanfare. Now, what will the Medical University of South Carolina do for an encore?

This will be the challenge facing Patrick Cawley, M.D., medical director for the Medical University Hospital Authority, and his successors for some time to come.

"This is only the beginning of an entirely new clinical enterprise that will continue for the next 20 years," Cawley says of Ashley River Tower. "Now we're starting the planning for Phase Two."

What and where Phase Two will be are questions still to be answered. After all, Ashley River Tower – as it exists today – wasn't even a strong consideration when university and hospital leaders began looking at alternatives for the main hospital several years ago. In the early planning stages, conventional wisdom was to expand the main hospital with a new facility where the current Library-Education Center sits. When property on the western edge of campus became available, that thinking was scrapped.

Once a location was established, university and clinical leaders had to determine which services would occupy the new facility. Although it was a difficult decision, Cawley says the Digestive Disease and Heart & Vascular services definitely were worthy of being the initial occupants.

"Both services are premier services which will do well," Cawley explains. "They're a large part of what we do, and both have great national and international reputations."

Cawley assumed the role of medical director in 2006. In addition to that responsibility, he serves as director of MUSC's hospitalist program and is an assistant professor of medicine. Educated at Georgetown University School of Medicine and trained at Duke University Medical Center, he came to MUSC in 2003.

As director of the hospitalist program, Cawley oversees a service designed to ensure a patient's continuity of care from admission to discharge. In that sense, Ashley River Tower, combined with the multidisciplinary approach to patient care, should enhance the hospital experience. Making use of optimal

With the North Tower behind him, Patrick Cawley, M.D., looks ahead to further changes on MUSC's campus.

"This is only the beginning of an entirely new clinical enterprise that will continue for the next 20 years. Now we're starting the planning for Phase Two."

—Patrick Cawley, M.D.

natural lighting, providing 156 spacious patient rooms, family lounges and wireless Internet access, the new facility is designed for a comfortable healing environment.


The addition of 156 beds on the Charleston peninsula comes in contrast to the national picture, where downsizing is the norm. "The need for beds in Charleston is tremendous," Cawley says. "We're bucking the national trend."

As with the opening of Rutledge Tower 10 years ago, Ashley River Tower poses an attractive, yet vexing, opportunity – what to do with the space vacated by faculty and departments moving into the new facility. It is a challenge, Cawley says, but a nice challenge to have. There are many entities on campus needing to expand to meet the increasing demand for services. At the present, the neurosciences will occupy some of the vacated space, along with oncology, general surgery and orthopaedics.

It is only a matter of time, however, before the cycle of building and moving happens again.

"In 20 years," Cawley says, "this place won't look the same."





Michael Gold, M.D., stands atop Rutledge Tower. In the background over his right shoulder is the Ashley River Tower.

MUSC HEART &

Heart and Vascular's tradition will continue in modern setting.

In a city steeped in history, it is only fitting that the South's oldest medical school has made some history of its own over the years, and perhaps nowhere is that more evident than in MUSC's Heart & Vascular services.

Approximately 60 years ago, Horace Smithy, a young assistant professor of surgery, first used an instrument of his own design, the valvulotome, to remove scar tissue from the heart of a young rheumatic fever victim who otherwise had no chance to survive. Smithy performed this procedure on several other patients with a good degree of success. Tragically, however, he suffered from the same condition, and died before he could teach someone to perform it on him.

Not long after Smithy's medical milestone, a young MUSC graduate joined the faculty on a teaching and research fellowship. Peter Gazes, M.D., became South Carolina's first cardiologist, and remains on the faculty to this day. Not only has he had a campus building named after him, but a medical society as well.

"We do have a long tradition of heart services," says Michael Gold, M.D., Ph.D., who directed the Heart & Vascular Center before it was restructured. "And we have continued that innovation. We're the only center in the state to do heart trans-

"We have the opportunity to reorganize with the new hospital so that all our procedural areas, our inpatient and outpatient areas, our academic offices and conference rooms are all under one roof."

—Michael Gold, M.D.

& VASCULAR



plants, we have the only pediatric cardiac catheterization or surgery programs, and we're leaders in many other areas of cardiac care.

"We are nationally and internationally known for valve-sparing cardiac surgery," he adds, "as well as management of arrhythmias and of heart failure."

Gold, the Michael Assey Professor of Medicine, came to MUSC in 2002 to direct the Department of Cardiology and serve as director of the Heart & Vascular Center. In recent years, as clinical departments in the Medical Center were realigned into various specialty centers, Heart & Vascular made the transformation relatively easily, Gold believes, because of its tradition.

"We've had a Heart Board for years that serves philanthropic needs as well as giving us a unique perspective from the community on our image and performance," Gold explains, "and we have had occasions when we've done common procedures together with interventional radiology. We've had ongoing collaborations with surgeons where we have done clinical and basic research projects for years. So I think we're in a more mature state in terms of integration across cardiovascular services."

Gold envisions even better collaboration and efficiency when Heart & Vascular – along with Digestive Disease – move into Ashley River Tower.

Caregivers will benefit from the move as much as patients, he predicts, due to the proximity of patient rooms, clinics, offices and procedural areas.

"I don't know how long it took you guys to get here," Gold says to visitors in his Rutledge Tower office, the Ashley River reflecting the midday sun 12 floors below, "but when I leave here I'll go to the fifth floor of the Children's Hospital to implant a defibrillator, and then I'll go to see my inpatients on the ninth floor of the main hospital, and when I have outpatients come in they're on the sixth floor of the Rutledge building, so it's not a very efficient setting for me to practice medicine.

"And the patients are bouncing around in different buildings, having to take multiple elevators to get to a procedural area," he adds. "We have the opportunity to reorganize with the new hospital so that all our procedural areas, our inpatient and outpatient areas, our academic offices and conference rooms are all under one roof. So the patients don't have to go all over the place, and we don't have to go all over the place. Hopefully in that time I spend walking around, I can do more productive things in Ashley River Tower, where we will have world class facilities."

And Charleston may witness more history in the making from the Medical University.



Eric Powers, M.D., director of Heart & Vascular services, believes the opening of Ashley River Tower and the other changes will improve patient satisfaction scores even more.

MUSC HEART & VASCULAR

Confluence of events benefits caregivers, staff and patients.

Some Charlestonians like to boast that the Atlantic Ocean is formed by the confluence of the Ashley and Cooper rivers at Charleston Harbor.

Although that may be stretching the truth a bit, a major confluence is under way in Charleston that could shape the future of health care.

This seismic merger is occurring at the Medical University of South Carolina, and at the center of it is Eric Powers, M.D., new director of MUSC's Heart & Vascular services.

The three confluent events are these: the reconfiguration of the former Heart & Vascular Center and other clinical services into more efficient alignments; the opening of Ashley River Tower, which is the new home of Heart & Vascular and Digestive Disease services; and the establishment of a comprehensive quality improvement plan, MUSC Excellence, to improve satisfaction among staff, patients and visitors.

Powers never had designs on directing Heart & Vascular services, but based on his responsibilities during the two years he's been at the Medical University of South Carolina, the position became a natural fit.

"I didn't come here with a plan to do what I am currently doing," he admits. Powers was recruited from the University of Virginia to direct the acute coronary syndrome center. After awhile, "I got into things like quality programs, which I'd been involved in before."

In addition to his clinical duties, Powers assumed more administrative obligations,

"There are a bunch of things coming together – partly because of MUSC Excellence, part of it may be this new organizational concept, part of it may be this new facility we're going to be working in. I think that energizes people."

—Eric Powers, M.D.

& VASCULAR



and when the Heart & Vascular Center was restructured, "I was already doing a lot of things" required of the new director "and I liked doing them, so I applied for the job."

Heart & Vascular services combine the clinical skills and knowledge of various specialties relating to heart disease, such as cardiology, surgery and radiology. The merging of certain specialties and sub-specialties into a comprehensive service is a growing national trend in health care.

"The concept is that medical care, certainly in academic medical centers like ours, has typically been divided into silos – cardiology silo, cardiac surgery silo, vascular surgery silo, interventional radiology silo," Powers says. "They all interact to some extent, but really don't interact as much as they should or could."

"When patients come to me as a cardiologist and I refer them for some imaging study, and then they go on to heart surgery, the fact that we're in a cardiology, radiology or cardiac surgery department is irrelevant to them," Powers says, explaining the administrative structure. "What's relevant is that those interactions are all of the highest possible quality, the most satisfying to the patients and their family. It's not to destroy the silos, because the department and division structure still has an important function."

As for the Excellence program, Powers said although the hospital environment was good, he's noticed a dramatic change for the better since the program was enacted in 2006.

"People have really bought into the Excellence program, and it's made

a clear difference," he says. "People who know MUSC, walk in and say, 'What's different about this place? It's so much nicer, friendlier.' Well, part of that is the MUSC Excellence program. One of the things it has done is it has challenged champions to step forward – really special people to step up and take this on."

"There are a bunch of things coming together – partly because of MUSC Excellence, part of it may be this new organizational concept, part of it may be this new facility we're going to be working in," he adds. "I think that energizes people."

"That's one of the reasons I'm particularly happy doing the director's job. I'm sometimes amazed at how well people are working together and how well things are going. One particular example is that patient satisfaction scores from the clinics on and off campus have soared. They're unbelievably good, and it's got nothing to do with Ashley River Tower – they're only going to get better with Ashley River Tower. I think it's an excellent design to allow everything to work well."

"Has the quality of service always been good? Sure, it's always been good," he says. "But it's like anything – you can always improve things. Nothing is ever as perfect or even as good as it can be."

It may take some doing to improve on the new health care environment found in Ashley River Tower. But, then, forming the Atlantic takes some effort, too.



*Mark DeLegge, M.D.,
stands in the Digestive
Disease conference room.*

MUSC DIGESTIV

*DeLegge appreciates labor that went
into Ashley River Tower.*

If there's an MUSC physician who can appreciate the construction of Ashley River Tower, it's probably Mark DeLegge, M.D., who labored as a construction worker himself between college and medical school.

And he, like many other MUSC faculty and staff members, can appreciate the efforts of those who labored to come up and follow through with the concept of the Digestive Disease Center, a collaboration of many specialties, including gastroenterology, surgery, radiology and pathology.

"The whole concept is patient-focused," he says. "It makes a whole lot of sense." The idea of extensive collaboration among various clinical specialists also went against traditional hospital-based hierarchies, where departments struggle to gain and protect their turf. "Here, we involve people in the process. Everybody here has a say," adds DeLegge, director of Digestive Disease services.

Because of the additional input, lines of communication among the various parties are more extensive and clearer. "Accountability exists from the physicians to the maintenance people," DeLegge says. "Every person is going to know what everyone else is doing at all times."

“Accountability exists from the physicians to the maintenance people. Every person is going to know what everyone else is doing at all times.”

—Mark DeLegge, M.D.

DIGESTIVE DISEASE



DeLegge credits MUSC’s leadership, from the President’s Office to the department chairs, for making the collaborative concept work.

“Dean (Jerry) Reves provided great leadership,” DeLegge says. “He set the stage and held people’s feet to the fire. The department chairs really stepped up to the plate to make it all work.”

As one of the primary occupants of Ashley River Tower, Digestive Disease services bring together specialists in these and other fields who literally work side by side and see patients in the same area.

“It’s like night and day,” DeLegge says in comparing the new concept to the former clinical practice. “When patients came into the old system, they had to go to different parts of the building depending on which clinical service they were seeing. By moving us together in Ashley River Tower, we’re all on the same floor. The clinics are in two different locations, but they’re under one roof.”

Although the building is patient-centered, the residual effects of the layout and design of Ashley River Tower, coupled with the concept of the Digestive Disease services, will benefit everyone who works there, DeLegge believes.

“The patient is our customer, so to speak,” DeLegge says, “but the physician is the customer of the hospital. In this new concept, there will be less stress for the staff, which in turn should lead to more job satisfaction and less turnover. We have always provided excellent patient care, but we will all be in much better position to provide that care once we’re in Ashley River Tower.”

DeLegge received his bachelor’s degree in biology from the State University of New York at Albany. At that point, he took a break from academics and worked construction jobs in Amarillo, Texas. His wanderlust and his goal of becoming a physician took him a thousand miles south to Guadalajara, Mexico, where he began his medical education at the University of Guadalajara. After two and a half years, he transferred to the University of Maryland, where he completed his education. He joined the MUSC faculty in 1999 upon an invitation from former DDC director Peter Cotton, M.D., following appointments at the Medical College of Virginia and the University of North Carolina, Chapel Hill.

He is nationally recognized as an expert on nutrition and has spoken all over the country on that topic, and has served as a consultant for several major corporations.

MUSC

MEDICAL UNIVERSITY
OF SOUTH CAROLINA

DIGESTIVE
DISEASE
CENTER

DEPARTMENT OF MEDICINE
GASTROENTEROLOGY &
HEPATOLOGY DIVISION

DEPARTMENT OF SURGERY
SECTION OF
INTESTINAL SURGERY

SUITE 210

*Peter Cotton, M.D., established the
MUSC Digestive Disease Center.*

MUSC DIGESTIV

*Cotton's dream realized in
new hospital.*

Peter Cotton's dream of a clinical enterprise where health care providers from different specialties work side by side on a daily basis is realized in the brick, glass and steel rising from 25 Courtenay Drive. For in Ashley River Tower, specialists and staff from various medical fields are arranged by organ systems, instead of traditional departmental lines.

"One of my dreams when I came here was to get the GI (gastrointestinal) surgeons, medical gastroenterologists and associated specialists living and working together, to provide a patient-friendly and efficient clinical service. When you share the same corridors, conference rooms, and even the same coffee pot, you either get along much better, or you don't get along at all," Cotton says with a slight laugh. "Proximity is a good start, but not sufficient in itself. We have been fortunate to have been able to develop the human infrastructure necessary to operationalize the concept."

It was a bold experiment, challenging the traditional face of academic medical centers, which are organized into separate departments, such as medicine, surgery and radiology. Not surprisingly, their agendas focus mainly on the interests of their respective departments, which may clash with the interests of others, including the patients.

The English physician came to the Medical University of South Carolina in 1994 because he found a receptive, if slightly nervous, audience. The strongest support has always come from College of Medicine Dean Jerry Reves and the hospital.

"It's exciting that Ashley River Tower encapsulates the dream. This first phase of the new MUSC hospital accommodates all of the activities of the faculty and staff of the Digestive Disease Center, and of the Heart and Vascular Center. I'm very comfortable with what's happening and pleased to see it."

—Peter Cotton, M.D.



And the results have paid off. What Cotton has done has garnered national and international recognition. During his tenure as director of the Digestive Disease Center, the unit has earned recognition as one of the nation's best centers for digestive disorders by *U.S. News & World Report* magazine for 11 consecutive years.

It should be noted that Cotton's success here has merely added to an already impressive career. A graduate of Cambridge University and St. Thomas Hospital Medical School in London, he developed the GI endoscopy laboratory at St. Thomas Hospital while still in training. In 1973, he was appointed to the faculty at Middlesex Hospital and Medical School as director of gastroenterology, where he was heavily involved in teaching and advancing the use of endoscopic procedures. Even though he established himself as one of the preeminent authorities on digestive diseases, he became frustrated with the dwindling support from England's National Health Service, leading him to contemplate a career change. While on a lecture tour of the United States in 1986, he stopped at Duke University, "and one thing led to another rather quickly," ultimately resulting in an offer from Duke to join the faculty.

"There was a huge difference in attitude – in England there was a 'can't do' attitude, and at Duke there was a 'can do' attitude," Cotton says. "I like doing a good job, and I like things growing. I had spent about a quarter of my time in London just trying to stop things from getting smaller."

Cotton came to MUSC eight years later, with a mandate to realize his concept of a "center" where clinicians who need to collaborate are located close to each other. "At Duke I almost had to take a cab to talk to a surgeon

on the other side of campus," he explains. "Here, we are cheek by jowl, which is good for our patients, good for research, and for training the next generation. And the hospital likes it because it is more efficient — and marketable.

"There was a lot to be done," he says of his early years here. "We had to design and develop new facilities. Initially, we were scattered in different places, which made things difficult, and bred misunderstanding. This collegial business of living together is very important to me.

"I think we've succeeded in providing an environment that encourages teamwork and effective collaboration, and is patient-friendly. We've put in place a number of mechanisms and staff that are designed to make the experience good from the patient's first contact," he adds.

Cotton has seen this collaborative center concept go from being virtually unnoticed to become a growing movement among academic medical centers across the nation. He is often invited to lecture on the topic, and inquiries came from other hospitals asking how the center operated.

MUSC has recently restructured almost all of its clinical operations into specific service areas, which build on the center concept. Mark DeLegge, M.D., has now taken over as director.

Cotton says he's satisfied with the direction the medical center is taking. "It's exciting that Ashley River Tower encapsulates the dream. This first phase of the new MUSC hospital accommodates all of the activities of the faculty and staff of the Digestive Disease Center, and of the Heart and Vascular Center. I'm very comfortable with what's happening and pleased to see it."

DEANS ON ART

With the opening of Ashley River Tower, the College of Health Professions (CHP) looks forward to a long, collaborative relationship with MUSC's new hospital as we strive together to meet the healthcare needs of our constituents. Having moved into our own new complex in 2005, the state of the art facilities offered in Ashley River Tower will provide a natural extension of the advanced technologies afforded to CHP students and clinicians. Through the use of teaching tools such as simulation, our healthcare professionals in disciplines such as Cardiovascular Perfusion and Anesthesia for Nurses can move seamlessly from educational settings to treatment environments. For our students who have the opportunity to complete their rotations or internships at Ashley River Tower, the experience will enable them to step confidently into any healthcare environment.

Given the diversity of CHP programs, our linkages to Ashley River Tower are not limited to a single discipline, and are not, in fact, limited to the roles played by our clinicians. Administrators such as Chris Malanuk, one of our Masters in Health Administration graduates, play a vital role in the development and operation of the new hospital. In a healthcare environment of spiraling costs, it is imperative to have trained administrators capable of maximizing the potential of both facilities and healthcare professionals. As Director of Strategic Planning and project director for the hospital replacement project, Chris serves as an excellent example of CHP's Department of Health Administration and Policy in staffing Ashley River Tower with administrators who have the skills to steward crucial assets.

Whether as students or as professionals, and whether as clinicians or administrators, many of the skilled healthcare professionals educated through CHP will both benefit, and benefit from, the Ashley River Tower facility. While the relationship between CHP and Ashley River Tower will undoubtedly be mutually beneficial, the ultimate beneficiary will be the healthcare constituents whom we both serve. To those who turn to MUSC for their families' healthcare needs, the relationship between CHP and Ashley River Tower ensures they can rely on a continuum of care that is available only when the most advanced facilities are combined with the best trained personnel.

As Dean of the College of Health Professions, I welcome Ashley River Tower as a vital resource and partner in MUSC's collective effort to continually advance the health sciences for the benefit of our citizens.

Sincerely,

Mark S. Sothmann
Dean, College of Health Professions

The College of Nursing loves a challenge and the opening of the new MUSC Ashley River Tower brings both challenge and opportunity. Our faculty and students are committed to exploring and adopting the latest technologies to enhance our education and improve the clinical care that nurses provide to patients. In that aspect, the new Tower opens a world of innovation, and provides a rich environment in which nurses can apply this technology to enhance patient safety and the quality of care.

Our students are currently immersed in technology, as the College is a leader in South Carolina in providing online nursing courses and using a variety of distance learning methodologies. In addition, these activities will be complemented by the state-of-the-art Clinical Simulation Center, housed in the College of Nursing, which is scheduled to open this spring. This new Center will support interprofessional educational experiences, as clinicians learn to work in teams to care for increasingly complex and acutely ill patients.

The Ashley Tower also represents needed clinical learning sites for our nursing students at all levels of education. This expansion of our hospital will create additional roles for advanced practice nurses, and opportunities for new models of interprofessional education. Bringing health care providers together in a facility that captures the future in today's work setting opens exciting doors of communication, creativity, and collaboration.

Finally, these opportunities also present challenges – the major one being the number of additional registered nurses who are needed to staff the Tower. These new beds are opening at a time of a critical nursing shortage, not only in our state but across the nation. The College of Nursing is, therefore, committed to working with the hospital and university leadership to identify and address these emerging needs, and to prepare a nursing workforce that fully reflects MUSC Excellence.

In the College of Nursing we pride ourselves on teaching, role modeling, practicing and researching important issues and evolving aspects of health care. The opening of the Ashley River Tower expands our horizons of nursing as "high tech" and "high touch" in important and potentially transformative ways.

Gail W. Stuart, PhD, APRN, FAAN
Dean, College of Nursing

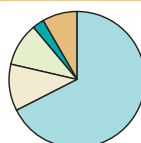
Financial Highlights for the year ended June 30, 2007

REVENUE

| | | |
|----------------------------------|---------------|-----|
| PATIENT SERVICES | \$733,000,000 | 67% |
| GIFTS, GRANTS, CONTRACTS | \$167,700,000 | 11% |
| STATE APPROPRIATIONS | \$143,300,000 | 10% |
| SALES, SERVICES, INTEREST, OTHER | \$129,800,000 | 8% |
| TUITION AND FEES | \$46,300,000 | 3% |



TOTAL REVENUE \$1,485,900,000

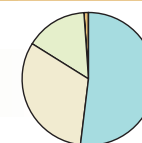


EXPENSES

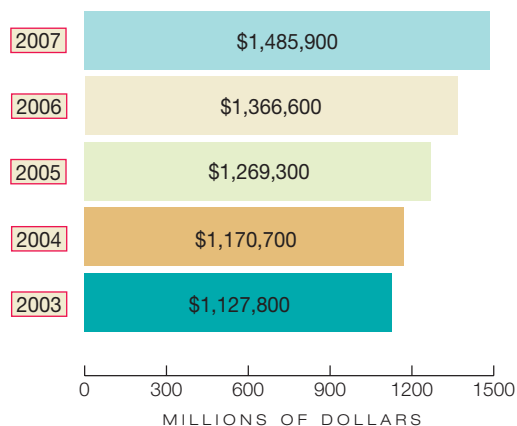
| | | |
|-------------------------------|---------------|-----|
| MUSC HOSPITAL AUTHORITY | \$725,800,000 | 52% |
| UNIVERSITY | \$446,400,000 | 32% |
| UNIVERSITY MEDICAL ASSOCIATES | \$217,900,000 | 15% |
| NONMAJOR ENTERPRISE FUNDS | \$2,700,000 | 1% |



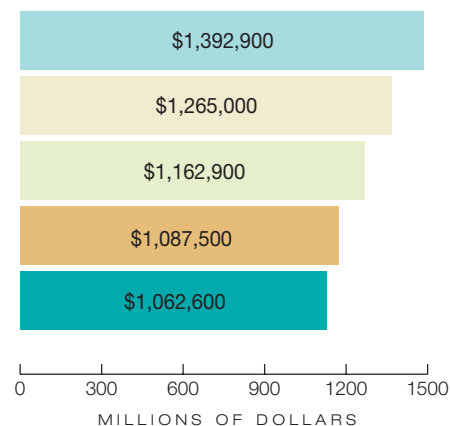
TOTAL EXPENSES \$1,392,900,000



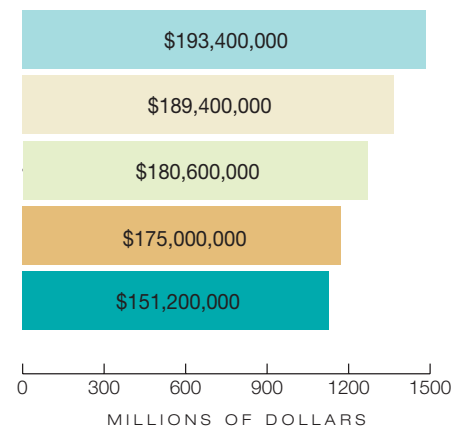
REVENUES



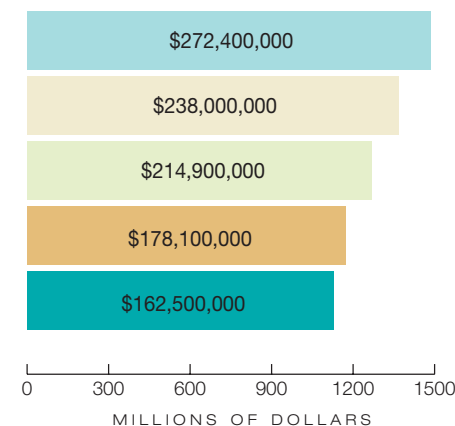
EXPENDITURES & TRANSFERS



RESEARCH CUMULATIVE AWARDS



FOUNDATION ASSETS



Financial Highlights

for the year ended June 30, 2007

REVENUES

UNIVERSITY

| | |
|--------------------------|-------|
| State Appropriations | 143.3 |
| Grants, Gifts, Contracts | 165.7 |
| Sales and Services | 114.1 |
| Tuition and Fees | 46.3 |
| Other | 15.7 |

MU HOSPITAL AUTHORITY

| | |
|------------------|-------|
| Patient Services | 733.3 |
| Other | 18.9 |

UNIVERSITY MEDICAL ASSOCIATES

| | |
|------------------|-------|
| Patient Services | 217.3 |
| Other | 28.2 |

NONMAJOR ENTERPRISE FUNDS 3.0

| | |
|-------|-----------|
| TOTAL | \$1,485.9 |
|-------|-----------|

EXPENSES & TRANSFERS

| | |
|------------|-------|
| University | 446.4 |
|------------|-------|

| | |
|-----------------------|-------|
| MU Hospital Authority | 725.8 |
|-----------------------|-------|

| | |
|-------------------------------|-------|
| University Medical Associates | 217.9 |
|-------------------------------|-------|

| | |
|---------------------------|-----|
| Nonmajor Enterprise Funds | 2.7 |
|---------------------------|-----|

| | |
|-------|-----------|
| TOTAL | \$1,392.9 |
|-------|-----------|

INCREASE IN NET ASSETS \$93.0

Note: The Nonmajor Enterprise Funds are comprised of the Medical University Facilities Corporation, CHS Development Company.

Source: Audited Financial Statements for the year ended June 30, 2007.

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